

Pro Se 7 (Rev. 10/16) Complaint for Employment Discrimination

**United States District Court**  
for the  
**NORTHERN DISTRICT OF ALABAMA**

FILED  
2017 JUL -6 P 2:02  
U.S. DISTRICT COURT  
N.D. OF ALABAMA

\_\_\_\_\_  
*Plaintiff,*

*(Write your full name. No more than one plaintiff may be named in a pro se complaint)*

v. Donald R. McAllister

Jefferson County Commission  
Personnel Board of Jefferson County  
Jefferson County Board of Equalization  
Randy Sims as Receiver and individuals

Case No.: \_\_\_\_\_

*(to be filled in by the Clerk's Office)*

JURY TRIAL ☒ Yes ☐ No

**2:17-cv-01134-TMP**

\_\_\_\_\_  
*Defendant(s),*

*(Write the full name of each defendant who is being sued. If the names of all defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names)*

**COMPLAINT FOR EMPLOYMENT DISCRIMINATION**

**I. The Parties to This Complaint**

**A. The Plaintiff**

Name	Donald R. McAllister
Street Address	6429 Spring St
City and County	Trussville / Jefferson
State and Zip Code	Alabama 35173
Telephone Number	205-837-2590
E-mail Address (if known)	mcallisterdr@yahoo.com

☒ Check here to receive electronic notice through the e-mail listed above. By checking this box, the undersigned consents to electronic service and waives the right to personal service by first class mail pursuant to Federal Rule of Civil Procedure 5(b)(2), except with regard to service of a summons and complaint. The Notice of Electronic Filing will allow one free look at the document, and any attached PDF may be printed and saved.

July 6, 2017

Date



Participant Signature

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## II. Basis for Jurisdiction

### B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization or a corporation. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

#### Defendant No. 1

Name	Jefferson County Alabama Commission
Job or Title ( <i>if known</i> )	
Street Address	716 Richard Arrington Jr Blvd N
City and County	Birmingham / Jefferson
State and Zip Code	Alabama 35203
Telephone Number	205-325-5555
E-mail Address ( <i>if known</i> )	

#### Defendant No. 2

Name	Jefferson County Board of Equalization
Job or Title ( <i>if known</i> )	
Street Address	Suite A 500 / 716 Richard Arrington Jr Blvd N
City and County	Birmingham / Jefferson
State and Zip Code	Alabama 35203
Telephone Number	205-325-5566
E-mail Address ( <i>if known</i> )	

#### Defendant No. 3

Name	Personnel Board of Jefferson County
Job or Title ( <i>if known</i> )	
Street Address	2121 Reverend Abraham Woods Jr. Blvd #100
City and County	Birmingham / Jefferson
State and Zip Code	Alabama / 35203
Telephone Number	205-279-3500
E-mail Address ( <i>if known</i> )	

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## Defendant No. 4

Name	<u>Ronald Sims</u>
Job or Title <i>(if known)</i>	<u>Former Jefferson County Receiver and Individual</u>
Street Address	<u>301 DOG LEG DRIVE</u>
City and County	<u>Williamsburg / NO COUNTY</u>
State and Zip Code	<u>Virginia 23188</u>
Telephone Number	<u>UNKNOWN</u>
E-mail Address <i>(if known)</i>	<u></u>

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is:

Name	<u>Jefferson County Alabama Human Resources Dept</u>
Street Address	<u>Suite A 610 716 Richard Arrington Jr Blvd N</u>
City and County	<u>Birmingham / Jefferson</u>
State and Zip Code	<u>Alabama 35203</u>
Telephone Number	<u>205-325-5249</u>

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to *(check all that apply)*:

- ☒ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

- ☐ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*

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- ☐ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

- ☐ Other federal law *(specify the federal law):*

\_\_\_\_\_  
Relevant state law *(specify, if known):*

\_\_\_\_\_  
Relevant city or county law *(specify, if known):*

### III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. The discriminatory conduct of which I complain in this action includes *(check all that apply)*:

- ☐ Failure to hire me  
☐ Termination of my employment  
☒ Failure to promote me  
☐ Failure to accommodate my disability  
☐ Unequal terms and conditions of my employment  
☐ Retaliation  
☐ Other acts *(specify):* \_\_\_\_\_

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

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B. It is my best recollection that the alleged discriminatory acts occurred on date(s):  
Beginning January 2015

C. I believe that defendant(s) *(check one)*:

- ☒ is/are still committing these acts against me  
☐ is/are not still committing these acts against me

D. Defendant(s) discriminated against me based on my *(check all that apply and explain)*:

- ☒ race I am a caucasian, a much less qualified black was selected  
☐ color \_\_\_\_\_  
☐ gender/sex \_\_\_\_\_  
☐ religion \_\_\_\_\_  
☐ national origin \_\_\_\_\_  
☐ age *(year of birth)* \_\_\_\_\_  
*(only when asserting a claim of age discrimination)*  
☐ disability or perceived disability *(specify disability)* \_\_\_\_\_

E. The facts of my case are as follows. Attach additional pages if needed. \_\_\_\_\_

I applied for the position\* in or about August 2014. I was interviewed in December 2014.

I was determined to be the best candidate. The selection process was cancelled, the top 3 candidates were caucasian. The application process was reopened in januray 2015, I was denied opportunity to re-apply. A less qualified, not meeting interview requirments, black candidate was selected.

\* The position is Chairman of Board of Equalization Jefferson County Alabama.

*(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)*

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#### IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date): some time in mid May 2015

B. The Equal Employment Opportunity Commission (check one):

☐ has not issued a Notice of Right to Sue letter

☒ issued a Notice of Right to Sue letter, which I received on (date): April 7, 2017

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

C. Only litigants alleging age discrimination must answer this question:

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

☐ 60 days or more have elapsed

☐ less than 60 days have elapsed

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Back wages, future wages, interest, pension contributions, Social security contributions,

nominal punitive compensatory damages, attorney fees and expenses, filing fees,

any other awards the court may feel in order.

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**VI. Certification and Closing**

Under Rule 11 of the Federal Rules of Civil Procedure, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of Signing: 7/6/17

Signature of Plaintiff: 

Printed Name of Plaintiff: Donald R. McAllister

**B. For Attorneys**

Date of Signing: \_\_\_\_\_

Signature of Attorney: \_\_\_\_\_

Printed Name of Attorney: \_\_\_\_\_

Bar Number: \_\_\_\_\_

Name of Law Firm: \_\_\_\_\_

Street Address: \_\_\_\_\_

State and Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_